

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1625 OF 2822

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

**A. Mr. Stanley Siefer**

Mailing Address 1540 Madison St

City	State	Zip Code
Denver	CO	80206

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Requested

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

Transaction ID : 4357939

Amount of Each Receipt this Period

10
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Tammy DuckworthContributions

[MEMO ITEM]

MEMO

Full Name (Last, First, Middle Initial)

**B. Ms. Margaret S. Hansson**

Mailing Address 2220 Norwood Ave

City	State	Zip Code
Boulder	CO	80304

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Requested

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : 4361008

Amount of Each Receipt this Period

200
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Tammy DuckworthContributions

[MEMO ITEM]

MEMO

Full Name (Last, First, Middle Initial)

**C. Ms. Kathryn Reed Smith**

Mailing Address 1515 Shasta Dr Apt 4326

City	State	Zip Code
Davis	CA	95616

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Requested

VOLUNTEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2015

Transaction ID : 4368267

Amount of Each Receipt this Period

100
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Tammy DuckworthContributions

[MEMO ITEM]

MEMO

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00